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April 10, 2008

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Commissioner for Patents**FROM: Michael J. Mazza**
(Reg. No. 30,775)**FAX NO.: (571) 273-8300****TELE. NO.: 650.620.5318**
FAX NO.: 650.620.6395**RE: U.S. Serial No: 10/698,025**
Attorney Docket No.: 0150.00**TOTAL NO. OF PAGES INCLUDING COVER: 16**

DOCUMENTS SUBMITTED:

Transmittal Form (1 page)
Reply Under 37 C.F.R. §1.116 (14 pages)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/698,025
	Filing Date	October 30, 2003
	First Named Inventor	Carlos Schuler
	Art Unit	3771
	Examiner Name	Steven O. DOUGLAS
	Attorney Docket Number	0150.00
Total Number of Pages in This Submission		

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ <input type="checkbox"/> Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Nektar Therapeutics	
Signature	<i>Michael J. Mazza</i>	
Printed name	Michael J. Mazza	
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PATENT

Attorney Docket No. 0150.00

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

4/28/08

In Re Application of:

Carlos Schuler et al.

Examiner: Steven O. DOUGLAS

Serial No.: 10/698,025

Art Unit: 3771

Filed: October 30, 2003

Conf. No.: 7124

Title: INCREASED DOSAGE METERED DOSE INHALER

REPLY UNDER 37 C.F.R. § 1.116**Mail Stop AF**

Commissioner for Patents

P.O. Box 1450

Alexandria, Virginia 22313-1450

Sir:

In response to the Final Office Action mailed February 12, 2008, please enter the following amendments and remarks.

Claims begin on page 2.

Remarks begin on page 10.